

## Home Health ICD-9/ICD-10 Alert

### YOU BE THE CODER: Tackle this Osteomyelitis Coding Scenario

Question: Our new patient is diabetic. He developed osteomyelitis which resulted in the amputation of his toes. The amputation site wound has delayed healing and we will be providing daily dressing changes. The patient takes insulin. Should I code for the non-healing surgical wound as primary, or should I list diabetes first because this condition caused delay in wound healing?

-- Arizona Subscriber

Answer: The way you code for this patient will depend on whether amputation cleared up the osteomyelitis, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C**, consultant and principal of Selman-Holman & Associates and CoDR-Coding Done Right in Denton, Texas. If there is no indication that the osteomyelitis remains, and the patient has no other complications of diabetes, you would list:

- M0230/M1020a: 997.69 -- Other complication of amputation site.
- M0240/M1022b: 250.80 -- Diabetes mellitus with other complication; type II or unspecified type, not stated as uncontrolled.
- M0240/M1022c: V58.67 -- Long term use insulin. If, however, the osteomyelitis remains present post-amputation, you would list:
  - M0230a/M1020a: 997.69 -- Other complication of amputation site
  - M0240b/M1022b: 250.80 -- Diabetes with other specified manifestations
  - M0240c/ M1022c: 731.8 -- Other bone involvement in diseases classified elsewhere
  - M0240d/M1022d: 730.27 -- Unspecified osteomyelitis; ankle and foot
  - M0240e/M1022e: V58.67 -- Long-term [current] use of insulin.

In either case, the focus of your care is the non-healing surgical wound, so 997.69 would be your primary diagnosis. Listing 998.83 (Non-healing surgical wounds) for this patient would be inappropriate because you can report the more specific 997.6x amputation complication codes.

Rule of thumb: Follow this with the appropriate 250.xx diabetes code. When a diabetic has osteomyelitis, you can assume the osteomyelitis is a manifestation of the diabetes unless the physician states otherwise.

Index entries in the coding manual ask you to use the manifestation code 731.8 for diabetic bone changes and 731.8 indicates that you must use an additional code for osteomyelitis.

If the patient still has a diagnosis of osteomyelitis, you'll follow 250.80 with 731.8 to indicate diabetic bone changes and 730.27 to specify that the cause of the bone changes is osteomyelitis.

In either case, wind up your list with V58.67 to comply with the guideline that indicates that the code should be added for Type II, unspecified type or secondary diabetics who take insulin. It's not appropriate to list an amputation status V code because the amputation is complicated.

While diabetes affects the healing of your patient's wound, it isn't the focus of your care. Your focus is the patient's

complicated wound.